## **DECLARATION AND POWER OF ATTORNEY** FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 60019446 -2

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

	l names e inventi	are listed below) of thon entitled:		below) or an original, first and ich is claimed and for which a					
the specification of w	hich is at	tached hereto unless t	he following hov is c	hecked:					
Number	( ) was filed on as US Application No. or PCT International Application  Number and was amended on (if applicable).								
<del></del>	<u> </u>		•						
including the claims, disclose all information Foreign Application(s) and/or the hereby claim foreign prior inventor(s) certificate listed	as amen n which i or Claim of ity benefit below and	ded by any amendments material to patentable Foreign Priority sunder Title 35, United Sta	nt(s) referred to above lity as defined in 37 ( ates Code Section 119 of any foreign application for	e above-identified specification, ye. I acknowledge the duty to CFR 1.56.  any foreign application(s) for patent or patent or inventor(s) certificate having					
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119					
GB		0217621.2	30 July 2002	YES X NO:					
				YES: NO:					
Provisional Application	1			<u> </u>					
I hereby claim the benefit below:	under Title	35, United States Code Se	ection 119(e) of any Unite	d States provisional application(s) listed					
		APPLICATION NUMBER	FILING DATE						
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U. S. Priority Claim	L		<u> </u>						
manner provided by the fir information as defined in Ti application and the national	st paragraphitle 37, Cool or PCT inf	oh of Title 35, United State de of Federal Regulations, S ternational filing date of this	s Code Section 112, I ack ection 1.56(a) which occu application:	ne prior United States application in the mowledge the duty to disclose material rred between the filing date of the prior					
APPLICATION NUMBER		FILING DATE	STATUS	STATUS (patented/pending/abandoned)					
	<del></del>								
				)					
		oint the following attorney(s Office connected therewith:		secute this application and transact all					
Customer Number		022879	Place Customer Number Bar Code Label here						
Send Correspondence t			Direct Telepho	ne Calls To:					
HEWLETT-PACKARD C		n	William Ellis	·					
P.O. Box 272400 Fort Collins, Colorado	, = -		(202) 672-54	86					
made on information with the knowledge imprisonment, or bottom	and be that wi h, under	lief are believed to be ilful false statements	true; and further the and the like so me 18 of the United St	are true and that all statements at these statements were made ade are punishable by fine or ates Code and that such willful int issued thereon.					
Full Name of Inventor: Jo	se Luis	Valero	Citizenship: E	<u>s</u>					
Residence:	Solf de B	iscaia, 17 Sant Cugat (	del Valles 08190 Baro	celona Spain					
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## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

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Full Name of # 2 joint inventor:	Osca	r Martine	)Z			Citizenship: ES		
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Post Office Address:	Avd. Graells, 501 08190 Sant Cugat del Valles-Barcelona-Spain							
inventor's Signature	•			• .	Date			
•								
Full Name of # 3 joint inventor:			·			Citizenship:		
Residence:		·	<del></del>	· .	**************************************			
Post Office Address:			<del> </del>	·	<u> </u>			
		-		<u> </u>				
Inventor's Signature			•	•	Date			
Full Name of # 4 joint inventor	·					Citizenship:		
Residence:								
Post Office Address:	_							
Invertor's Summure								
)			•		Date	• • • • • • • • • • • • • • • • • • •		
Full Name of # 5 joint inventor	:					Citizenship:		
Residence:				·		<u> </u>		
Post Office Address:					·	<del></del>		
INVERTOR'S SIGNATURE			····	<del></del>	D-4-			
					Date			
F-11.0								
Full Name of # 6 joint inventor	-			· · · · · · · · · · · · · · · · · · ·	<del></del>	Citizenship:		
Residence:	-			,	_			
Post Office Address:								
inventor's signature					Date			
			•					
Full Name of # 7 joint inventor	-	•				Citizenship:		
Residence:						Oraci ranga		
Post Office Address:	-			· · ·				
rost Office Address:					<del></del>			
Inversor's Signature		···			Date			
Full Name of # 8 joint inventor	r.					Citizenship:		
Residence:								
Post Office Address:								
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Inventor's Signature				<del></del>	Date			